

Program/County_____

**Tennessee Association of Adult and Community Education
TAACE Conference
July 13-15, 2003 Nashville TN**

Make Check or Purchase Order payable to: TAACE Conference

Mail to: Lynn Seifert
Cheatham County Board of Education
102 Elizabeth Street
Ashland City, TN 37015

*****NOTE: Registration Forms are due Monday, June 2nd*****

Position /Teaching Assignment_____

Name _____

Home Address _____

City _____

State _____ Zip Code _____

Phone _____

Fax _____

Email _____

*Registration includes the Sunday Evening Banquet, the Monday President's Reception
and the Tuesday TAACE Breakfast.*

Registration with \$10 TAACE dues included \$ 100.00

On site registration \$ 125.00

REGISTRATION FEE \$ _____

_____ I **do not** plan to attend the Sunday Awards Banquet - July 13th

_____ I **do not** plan to attend the President's Reception on Monday - July 14th

_____ I **do not** plan to attend Tuesday's TAACE Breakfast - July 15th

_____ I request a vegetarian meal.

Guest Tickets: Attach an additional personal check payable to TAACE Conference for
guest tickets.

Sunday: Guest (s) at Awards Banquet _____ Tickets @ (\$25) \$ _____

Monday: Guest (s) at President's Reception _____ Tickets @ (\$15) \$ _____

Tuesday: Guest (s) at the TAACE Breakfast _____ Tickets @ (\$15) \$ _____

For Office Use ONLY

Registration Fees

Check or PO # _____ Amt _____

Guest Tickets

Check # _____ Amt _____